



DRUG RECEIPT

CC # _____

BOOK #

PAGE # _____

DESTRUCTION # _____

District/Unit BX / DCU

Name & Rank of Arresting Officer PC Santillana ID# 100339

DEFENDANT'S NAME	ADDRESS	CITY	STATE
[REDACTED]			

To be completed by ECU personnel only

Name and Rank of Submitting Officer JPM/HS ID# 1800

Received by _____ Date _____ B-39-10

ECU Control



Massachusetts Department of Public Health
Drug Analysis Laboratory
Sample Evidence Chain

Police Dept. or Agency

Boston D.C.U. Police Dept.

Laboratory # [REDACTED]

<u>Officer</u>	<u>Transfer To</u>	<u>Date</u>	<u>Evidence Officer</u>	<u>Chemist</u>	<u>Batch No.</u>
P.O. CRAIG SMALLS Boston D.C.U. Police	Safe	12/24/2010	Shirley Sprague		68989
	Lab	03/04/2011	Elisabeth O'Brien	Annie Dookhan	72310
	Safe	03/31/2011	Elisabeth O'Brien		73835
P.O. SYBIL WHITE Boston D.C.U. Police	External Location	04/05/2011	Elisabeth O'Brien		74074

Q103-411A	[REDACTED]	5		Q103-31-11
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Massachusetts Department of Public Health
Drug Analysis Laboratory
Sample Pickup Receipt

Samples Picked Up On: 04/05/2011 Batch #: 74074

Returned to: P.O. SYBIL WHITE of the Boston D.C.U. Police Dept.

Returned by Evidence Officer: ELO

Sybil White

Batch #: 74074

No. [REDACTED]

Date Analyzed:

3-26-11

City: Boston D.C.U. Police Dept.

Officer: P.O. CRAIG SMALLS

Def: [REDACTED]

Subst: SUB

Amount:

No. Cont: 1 Conf: pb

Date Rec'd: 12/24/2010

No. Analyzed:

Net Weight: 0.07

Gross Wt.: 2.22

Tests: 4/8/2011

*2 DJR

Prelim: Heroin

Findings: Heroin

DOB 123111.5 copy again
possibly blank 9/2/11 PJS

6C/m5④

DOB 123111.5